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From: Commanding Officer, Naval Hospital Bremerton
To: All Ships and Stations, Puget Sound

Subj: HEALTH CARE CONSUMER COUNCIL MEETING MINUTES OF
5 JUNE 2003

Encl: (1) Attendance Roster

The Health Care Consumer Council (HCCC), chaired by Mr. Terry Roberts, Director for Healthcare Support, met at 1000, 5 June 2003, in the Naval Hospital Bremerton (NHB) Ross Auditorium with CDR James A. Thralls, Acting Executive Officer, Naval Hospital Bremerton presiding. Enclosure (1) lists attendees.

Mr. Roberts welcomed those attending and stated the next HCCC meeting would be held on 4 September 2003, at 1000 in Ross Auditorium.

Mr. Roberts asked everyone to review the minutes of the previous meeting; there were no additions, deletions or corrections.

Mr. Roberts introduced CDR James Thralls, Acting Executive Officer, NHB.

CDR Thralls stated he is the Acting Executive Officer while CAPT J. P. Kelly is deployed with Fleet Hospital EIGHT (FH8) to Rota, Spain. CDR Thralls stated FH8 still has an active mission and they are still receiving patients; their return date is not known at this time. He stated there are still 180 NHB staff personnel still deployed together with other personnel from other organizations. He stated NHB still has backfill Reservists but that as the war draws down NHB is getting some indication that staffing will continue to change. He stated NHB is looking at contracts and making sure it can maintain capability. He stated NHB will have a change of command on 12 June; CAPT Hunter will be going to PACFLT Force Surgeon and CAPT W. M. Roberts will assume command of NHB. He stated that CMDCM Lopez will be retiring that same week and CMDCM Robert Finley will take over as NHB Command Master Chief. He stated that during the summer months is when NHB goes through its gap transition with PCS moves. He stressed that PCS orders are looked at very closely to ensure NHB can maintain capabilities.

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He stated CAPT Hunter had asked him to the HCCC that during this gap transition if anyone has need of a specialty service to make sure NHB knows, and work through the Health Benefits Advisors, so NHB can transition personnel to those areas that are critical.

Mr. Roberts stated during March the HCCC had been informed that FH8 was deploying and some NHB capabilities would go down. He stated during this time frame NHB has come back to full capabilities, with the exception of oral surgery; neurology is back on line, urology is back on line and dermatology is back on line; and enrollment had been temporarily suspended but has been reopened for active duty family members only. He stated NHB is looking at some temporary employment of local contract positions during 15 June-15 September and hopefully get enrollment completely reopened shortly. He stated the question is often asked, "Does NHB do waiting lists?" He stated NHB does not do waiting lists for any category or enrollment. He stated if there are active duty families that were placed out in the network during the time period since March who wish to come to NHB, they are welcome to come the TRICARE Service Center and say, "I'd like to be back with NHB," and it will happen.

Mr. Dahl asked if Mr. Roberts knew the retiree population coming into NHB now with TRICARE For Life and other programs. Mr. Roberts stated the TRICARE For Life is basically the Bremerton Plus population. Mr. Roberts stated approximately 14-16 percent of NHB's total enrollment are retirees. He stated that includes TFL and the rest of the retirees. Mr. Dahl asked if there were any in-patient retirees and Mr. Roberts stated there was a high census of retirees and TRICARE For Life.

Mr. Roberts introduced Mr. Dahl to the HCCC at the Retired Affairs Officer at PSNS. Mr. Dahl stated the office is now open five days a week. Mr. Dahl stated he has the forms for concurrent pay, with instructions on how to fill them out, if anyone is qualified and interested. He stated he would also leave some with Mr. Roberts at NHB if anyone needed one. He further stated that any Desert Storm veterans who may have applied for VA benefits and been denied, they can reapply. He also stated that concurrent pay is your retirement pay plus VA benefits of 60 percent and above on 20 to 30 year enlistments. He stated that if you were awarded a Purple Heart, then it would

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be a little different; to receive concurrent pay, the disability must be combat related.

Mr. Roberts introduced Ms. Alice Acker, Field Operations Manager, Health Net Federal Services and Managed Care Support Contractor. He stated Ms. Acker would address some changes in the Transition Assistance Management Program (TAMP), which really help the Reservists.

Ms. Acker stated the TRICARE Service Center (TSC) is located on the third deck of the new wing, the Family Care Center. She stated there are Beneficiary Services Representatives there who know the NHB really well, and know the network well, and if anyone is aware of someone transferring into the NHB area they can do things via mail or the 800 number down in California, but the representatives here really know their facility and she encouraged everyone to use them. Ms. Acker passed out a facts sheet about TAMP and also mentioned the TRICARE web site at www.TRICARE.osd.mil, and stated there is also a lot of information available there. She stated any new TAMP information could be found there, and also indicated it discusses demobilization of some of the Iraqi Freedom personnel and other current event information of interest. She stated there would also be press releases in the Northwest Navigator talking about TAMP(strikethrough: , and that they appear regularly.) She stated that TAMP is a program much like COBRA in the civilian community where when personnel are discharged from active duty there's a certain umbrella that will take care of them and their families' healthcare needs. She stated these personnel would include Reservists who have been called up for active duty in support of Iraqi Freedom and served more than 30 days; people involuntarily retained on active duty in support of Iraqi Freedom at the time of their separation; and people who were separated and voluntarily returned to active duty in support of Iraqi Freedom. She stated one of the enhancements of TAMP is, if you have served less than six years, the servicemember and their family can have benefits for 60 days from the date of discharge/release of the sponsor; and for anyone serving over six years and being discharged/released it's 120 days. She stated the DD214 usually indicates this information pretty clearly. She stated the twist to this is, if someone is eligible for the 60 or 120 days and wants to stay in Prime, they have to fill out a new enrollment form so TMA can keep track of who's coming and going. She stated another

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enhancement for Reservists, which isn't on this form, is that before in order to be enrolled in Prime you had to have orders for a 180 days and now it's down to 30 days. She stated that often beneficiaries ordered to active duty already have an established relationship out in town with a doctor who is not a TRICARE Prime provider and they would like to stay with him, and for them Standard maybe the best thing. She stated that for the majority of people, though, Prime is the most cost effective. Mr. Roberts asked Ms. Acker to talk about the co-pay issue for Reservists who are demobilizing, and asked her if that wasn't Standard. If someone is demobilizing and they hold Prime, there are no co-payments; if they opt for Standard/Extra the deductible for Standard/Extra has been waived however they are still responsible to pay the cost share. If they had questions regarding that issue to come up to the TSC. Mr. Roberts stated there are a lot of Reservists that have been mobilized in different areas and some are now being demobilized and they need to talk to someone regarding their medical benefits. Ms. Acker stated TMA is coming out with a brochure called The Transitional Healthcare Benefit, for if anyone needs any assistance, please come up to the TSC.

Ms. Ritchey (I believe it was) asked a HIPAA related question and Mr. Roberts stated HIPAA is a topic requiring considerable time to explain. He stated for the September HCCC meeting he would make HIPAA a topic. He stated that HIPAA has to do with privacy of patient information being transferred, primarily, over electronic means, and with patient information being left out in the open. He stated NHB might have a patient's name on the room, and in the past might have the SSN. You can no longer have the SSN, and some people say you shouldn't even have the name. He stated it also deals with having patient information on a secure server and transferring it to a staff member on a non-secure computer. You can't do that. He stated there is also supposed to be a form signed by every patient to go into their health record that they are aware of the rules of engagement, and they can also write on the form that they don't want their information released to anyone without permission; that restriction has to be renewed every 60 days. Ms. Acker stated this is all designed to be personal protection against someone using electronic means to gain access to personal information that could be used against someone, or to steal personal information concerning someone to commit fraud in their

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name. She stated that personal information can be shared between covered entities, such as two MTF, but that they could not give out information concerning an individual to a newspaper. The XO stated this would be a great topic in the future, especially since it involves patients directly. He stated HIPAA basically replaces the Privacy Act of 1974 and, therefore, the federal government got involved to say "we need to do better in privacy." He stated NHB has gone through its entire system to ensure that patient information isn't available in places where it shouldn't. He stated NHB has also developed a release form for patients to sign so that their information can be released if they so desire. (Unidentified female speaker) We received a letter that covered all this information and it said the first time you're seen by a PCM you will need to fill out one of these forms. I had a dental appointment and filled one out, but when I saw my PCM I wasn't asked to fill one out. (Unidentified male speaker) We have not initiated that form yet here at NHB. I believe all form addresses is simply that you're acknowledging that you are aware of your privacy rights under HIPAA, which stands for Health Insurance Portability and Accountability Act. He stated there is nothing in that title that mentions privacy but privacy has become a very important part of that federal regulation, which everyone, civilian and military, have to live with now.

(Unidentified female speaker (Catherine)) I have a question about the TRICARE web site which we're supposed to be able to register on and get a user name and password. I've tried several times to log on to the web site and each time there has been some kind of problem and I cannot get registered. It seems a lot easier just to use the 800 number. (Unidentified female speaker) I can tell you that the system was down for a while. However, when it is up and running it is a very useful tool. She stated you just have to keep trying until you can get registered. Mr. Roberts stated TMA is aware of the issues with TRICAREonline.

(Unidentified female speaker (Catherine)) The doctor said that if we had healthcare questions to contact the Healthcare Advisory but did not give a name or number. Mr. Roberts stated NHB has Beneficiary Service Representatives (BSR) and Health Benefits Advisors (HBA). He stated the BSRs are TRICARE Service Center (TSC) representatives and within NHB there are two HBAs.

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He asked Mr. Koether to give out the phone numbers for the HBAs. The unidentified female speaker (Catherine) stated there used to be a Healthcare Advisory that consisted of ombudsmen and retirees and asked if that still existed. Mr. Roberts stated it was called a Customer Service Council, which has been closed down and NHB is moving towards a different forum for doing that. He stated NHB is looking to have more participation on committees by patients themselves. He stated the deployment has slowed that process down a little bit, but NHB is still working on developing that kind of committee.

(Unidentified female speaker (Catherine)) Is there a shortage of pharmacists, because I sat with a large group of people the other day for over an hour trying to get a prescription filled. CDR Simon stated there are still several personnel from the pharmacy deployed and that NHB had also just opened up another re-fill pharmacy which is taking more time and personnel away from the pharmacy. The XO asked CDR Simons to elaborate on the best times to have a prescription filled and also on how often an hour wait occurs. CDR Simons stated the pharmacy is currently running at 46 percent less than ten minutes and 80 percent less than 20 minutes. She indicated, however, that there are peak times throughout the day when it is very busy, i.e., the end of the day and between about 1000 and 1300. She stated before 1000 and between 1300 and 1500 are the best times.

Mr. Roberts introduced Ms. Janet Mano, Healthcare Promotions.

Ms. Mano stated "We want you healthy. We could have the best health care system in the world and still have unhealthy families and personnel. Everyday lifestyle habits are the greatest determinant of health." Ms. Mano stated NHB has an active outreach program for community groups and commands to empower commands. Health Promotion topics are cycled into monthly themes to ensure that we cover the major risk factors. The summer Healthcare Promotion themes are family and safety focused. Please contact Health Promotion at 475-4997 if you would like to bring Health Promotion displays, classes, POD notes, newsletters in support of healthy lifestyles. Ms. Mano distributed brochures, posters and reproducible handouts related to family summer safety. Bicycle helmets are available for \$5 at NHB on Thursdays from 1200 to 1600. Ms. Mano announced that bike helmets would be available at both Bangor and Jackson Park, outside the CDCs, on June 17th, as part of a county-wide "Gear Up
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For Summer" event. Helmets are required on military bases as well as in the cities of Bainbridge, Bremerton and Poulsbo.

(Unidentified male speaker (Mr. Dahl)) On highway 303 by Wal-Mart there is a large pond and I'd like to know if anyone has checked that for West Nile Virus. Ms. Mano stated she didn't know the answer to that, but that Preventive Medicine is pretty active and may have. (Unknown male speaker) Our Preventive Medicine has been very active this year with the county and others in monitoring for and responding to West Nile Virus. He stated there has not been any West Nile Virus reported in Western Washington or Kitsap County this year.

Ms. Mano stated the leading cause of accidental death among children one to four years old is drowning. She stated if drowning prevention or education is a topic someone would like to have addressed, just contact Healthcare Promotions and they'll assist with it. She also stated she had some coupons for 25 percent off life jackets. She mentioned NHB's and Kitsap County's car-seat-check program and indicated she had a laminated handout regarding car seats. She distributed posters promoting NHB's and Kitsap County's car-seat-check program. Car seat checks are held at NHB on the last Wednesday of each month from 1300 to 1700. She distributed Personal Health Assessment examples on a 20-question, anonymous, personal health assessment. This survey is web based and takes about two minutes to complete. It is anonymous, no name or other identifier, but provides a "commander's summary." This tool is a great way for a command to kick-off health promotion activities targeted to the specific needs of its members.

Mr. Dahl stated the retiree seminar will be held on 6 September from 0800 to 1400 at the Naval Station gym, Building 502.

In response to a question about a survey concerning the pharmacy refill station moving, the XO indicated that for security purposes the current location of the refill station makes it vulnerable. He indicated that the process to move the refill station will take some time and that currently the command is asking beneficiaries where they think the refill station should be located for convenience purposes if it does have to move.

Mr. Roberts mentioned that everyone should have noticed that there are now contract security personnel on the gate, which
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allows the hospital corpsmen to return to their jobs in the hospital. He indicated that NHB is a free-standing installation responsible for its own security. The XO stated NHB has recently received funding to hire some Johnson Controls security personnel. He indicated that NHB had always had one civilian security person on 24-hours-a-day, which was augmented by

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military personnel from the hospital; this really impacted NHB during the current heightened security posture. He stated with the recent funding NHB was able to return about 15 corpsmen back to their jobs in the hospital.

Mr. Roberts stated HIPAA would be an agenda topic for the September meeting and asked if there were any other topics of interest for that meeting; there were none.

The XO stated there would be some forthcoming articles from PAO concerning enrollment. The new PAO, Larry Coffey, was mentioned and the XO said NHB had a great PAO officer who retired and now we have a new PAO officer who is very interested in putting out information. Mr. Koether stated for active-duty personnel, enrollment is something that is supposed to be accomplished through their medical department when they check in. He stated if they were not enrolled when checking in, they can always come to TRICARE at NHB and enroll. Ms. Acker stated enrollment applications can also be sent out electronically. Mr. Roberts stated enrollment is an issue, especially with operational forces, that is being worked on; he indicated it is also another hour-long topic.

Mr. Dahl stated Pier 36 makes ID cards if anyone is in need of an ID card. Ms. Acker stated people could go to the DEERS web site at "back slash rsl" and it tells you where all the different locations are that make ID cards.

The point of contact for these minutes in the Healthcare Support Directorate is Mr. Hank Rose, Code 08S, at (360) 475-4365.

T. D. ROBERTS
By direction